SECTION 14:

PAY DIFFERENTIAL 440 IMPROVING AFFORDABILITY AND ACCESS TO HEALTH CARE - BARGAINING UNITS R01, R03, R04, R11, R14, R15, R17, R20, R21, AND EXCLUDED EMPLOYEES

Established: 07/01/2020

CBID DESIGNATIONS	RATE	EARNINGS ID	DEPARTMENT
Rank and File: R01, R03, R04, R11, R14, R15, R17, R20, and R21	\$260 per Month	GHCP	All Departments
Excluded: S01, S03, S04, S11, S14, S15, S17, S20, S21, M01*, M03, M14, M17, M21, M99, C01, C03, C04, C11, C14, C15, C17, C20, C21, E01, E03, E04, E11, E14, E15, E17, E20, E21, U01, U04, U15, and U17			
Classifications tied to SEIU** E, E48, E59, E67, E68, E77, E78, E79, E97, E98, and E99			

CRITERIA

Employees in a classification with a CBID identified above, who are eligible for state-sponsored health benefits, as identified in the table below, shall receive a differential of \$260 per month.

- * CEA positions in class code 7500 tied to BU 06, 07, & 08 are not eligible to receive the pay differential.
- ** Employees designated E48 E99 must be tied to SEIU.

Tenure	Time Base	Benefits Eligible
	Full-Time	Yes
	Part-Time a) Half-time or more b) Less than half-time	Yes No
Permanent	Intermittent (PI) a) 480 or more paid hours/Control Period (or 960 paid hours in two consecutive Control Periods to qualify to continue coverage) b) Less than 480 paid hours/Control Period	Yes*** No

SECTION 14:

PAY DIFFERENTIALS

Limited-Term (less than 6 months)	N/A	No
	Full-Time	Yes
Limited-Term (more than 6 months) Temporary (TAU) (less than 6 months)	Part-Time a) Half-time or more b) Less than half-time Intermittent N/A	Yes No No
	Full-Time	Yes
Temporary (TAU) (more than 6 months)	Part-Time a) Half-time or more b) Less than half-time	YesNo
· ·	Intermittent	No

^{***}Only paid hours in the PI appointment shall be counted toward the 480 hours in a Control period.

This payment will be provided commencing with the July 1, 2020 pay period, expiring after the June 2022 pay period.

Employees on medical leave who maintain eligibility for a health care plan will maintain eligibility for payment.

The pay differential shall not be part of the employee's base salary for the purpose of computing salary adjustments.

Employees in a classification in a CBID identified above, who are not eligible for state-sponsored health benefits, shall not be subject to Pay Differential 386 - Personal Leave Program 2020 Differential – Bargaining Units 1, 2, 3, 4, 6, 7, 8, 10, 11, 14, 15, 16, 17, 18, 20, 21 and Excluded Employees.

If receiving this pay differential not eligible for Flex or Coben Cash.

Note: If an employee's CBID differs from the pay scale CBID for an otherwise eligible class, the employee is eligible for the pay differential.

IF APPLICABLE, SHOULD PAY DIFFERENTIAL BE:		
PRO RATED	No	
SUBJECT TO QUALIFYING PAY PERIOD	No	
ALL TIME BASES AND TENURE ELIGIBLE	Yes/No****	
SUBJECT TO PERS DEDUCTION	No	

PAY DIFFERENTIALS

INCLUSION IN RATE TO CALCULATE THE FOLLOWING BENEFIT PAY:		
OVERTIME	Yes	
IDL	No****	
EIDL	No****	
NDI	No****	
LUMP SUM VACATION	No	
LUMP SUM SICK	No	
LUMP SUM EXTRA	No	